

In re Application of:

Docket No. 03500.017620

Shigeki Mori et al.

Appln. No.: 10/665,426

Examiner: Alan H. Luong

Filed: September 22, 2003

Group Art Unit: 2623

For: RECEIVING APPARATUS AND
RECEIVING METHOD
AND IMAGE FORMING METHOD

Confirmation No.: 6515

November 18, 2008

Mail Stop Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional claims fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	12	MINUS	20	= 0	x \$26 \$52	\$0.00
INDEP. CLAIMS	3	MINUS	3	= 0	x \$110 \$220	\$0.00
Fee for Multiple Dependent claims \$195/\$390						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

☐ Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$_____ is enclosed.

☐ Charge \$_____ to Deposit Account No. 06-1205 to cover the _____ fee.

☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under

37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

/Daniel S. Glueck/
Daniel S. Glueck
Attorney for Applicants
Registration No. 37,838

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200
DSG/jr

FCHS_WS 2656945v1